

## **LOW VOLTAGE ELECTRICAL PERMIT APPLICATION**

SUBDIVISION	LOT # BLDG PERMIT #
STREET ADDRESS	SUITE/UNIT #
PROJECT NAME	COMMRESID
GENERAL CONTRACTOR/HOMEOWNE	ER
LOW VOLTAGE CONTRACTOR NAME	
ADDRESS	
CITY/STATE/ZIP CODE	
STATE LICENSE CE#	LLE#
*ALARM CONTRACTORS #	TELEPHONE
CHECK	X ALL THAT APPLY
*REQUIRES CONTRACTORS SPECIA	ALIZED LICENSE FOR SECURITY AND FIRE ALARM*
<u>R</u>	RESIDENTIAL
*FIRE ALARM	*SECURITY
<u>C</u>	<u>OMMERCIAL</u>
PHONEDATA	AUDIOVIDEOFIBER
* FIRE ALARM *	SECURITYHVAC CONTROLS
REMOTE CONTROLS	LANDSCAPE LIGHTING
NURSE CALL	GATE CONTROLS
ENERGY MANAGEMENT	OTHER
SIGNATURE	DATE

NOTE: ALL PERMIT APPLICATIONS MUST HAVE AN ADDRESS VERIFIED BY THE FRANKLIN PLANNING DEPARTMENT (SUITE 104) INCLUDING MULTI-UNIT/SUITES. YOU WILL NEED TO PROVIDE BUILDING FLOOR PLAN FOR PROPER ADDRESS ASSIGNMENT. THANK YOU. UPDATED 03/15/12